

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 DEBICELLA FOR CONGRESS 2014

ADDRESS (number and street) P.O. BOX 369 Check if different than previously reported. (ACC) FAIRFIELD CT 06824

2. FEC IDENTIFICATION NUMBER C C00549527 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT CT 04

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2014 through 03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer BRADLEY T CRATE

Signature of Treasurer BRADLEY T CRATE [Electronically Filed] Date 04 / 15 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only table with 8 columns and 1 row. FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

DEBICELLA FOR CONGRESS 2014

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	204645.00	507453.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	204645.00	507453.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	130190.53	160400.40
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	130190.53	160400.40
8. Cash on Hand at Close of Reporting Period (from Line 27).....	346552.60	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

DEBICELLA FOR CONGRESS 2014

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	189810.00	473460.00
(ii) Unitemized.....	14835.00	33993.00
(iii) TOTAL of contributions from individuals ▶	204645.00	507453.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	204645.00	507453.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	204645.00	507453.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	130190.53	160400.40
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	500.00	500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	130690.53	160900.40

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	272598.13
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	204645.00
25. SUBTOTAL (add Line 23 and Line 24).....	477243.13
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	130690.53
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	346552.60

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
NORMAN A ALDRICH

Mailing Address 110 BUTTERNUT LANE

City STRATFORD State CT Zip Code 06614

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ACCOUNTANT

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5922

Amount of Each Receipt this Period
 150.00

B. Full Name (Last, First, Middle Initial)
Mr. FRED J ANTHONY

Mailing Address 90 HUNTINGTON ST

City SHELTON State CT Zip Code 06484

FEC ID number of contributing federal political committee. **C**

Name of Employer ANTHONY & REALE Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 11 / 2014

Transaction ID : SA11AI.5414

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
HARRY SINGH ARORA

Mailing Address 56 ROCKWOOD LANE

City GREENWICH State CT Zip Code 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer ARCIM Occupation INVESTMENT MANAGEMENT

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 30 / 2014

Transaction ID : SA11AI.5885

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
YAT PANG AU

Mailing Address **500 WASHINGTON STREET**
#488

City **SAN FRANCISCO** State **CA** Zip Code **94111**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VERITAS INVESTMENT INC** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 21 / 2014

Transaction ID : SA11AI.5402

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
TOM AURAY

Mailing Address **15 FLAT ROCK RD**

City **EASTON** State **CT** Zip Code **06612**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BRIDGEPORT FITTINGS INC** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 04 / 2014

Transaction ID : SA11AI.5290

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
HARI AVULA

Mailing Address **116 LEEUWARDEN RD**

City **DARIEN** State **CT** Zip Code **06820**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PEPSICO** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 23 / 2014

Transaction ID : SA11AI.5404

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
PETER R BALDERSTON

Mailing Address 19 COLLINSWOOD ROAD

City State Zip Code
WILTON CT 06897

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11AI.5822

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. WILLIAM H BANKS

Mailing Address 5 WHEAT LANE

City State Zip Code
DARIEN CT 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5705

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
JAMES BARTLETT

Mailing Address 643 OENOKI RIDGE

City State Zip Code
NEW CANAAN CT 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5720

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
GEORGE P BAUER

Mailing Address 206 DUDLEY ROAD

City State Zip Code
WILTON CT 06897

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 18 / 2014

Transaction ID : SA11AI.5505

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DUMMOND BELL

Mailing Address 72 WILLOW STREET

City State Zip Code
SOUTHPORT CT 06890

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DCBIII ASSOCIATES CONSULTING

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 29 / 2014

Transaction ID : SA11AI.5280

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
STUART BELL

Mailing Address 350 WILLOW STREET

City State Zip Code
SOUTHPORT CT 06890

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 18 / 2014

Transaction ID : SA11AI.5492

Amount of Each Receipt this Period
2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3850.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. STEPHEN R BELLIS		Date of Receipt M M / D D / Y Y Y Y 03 / 11 / 2014	
Mailing Address 121 LANE STREET		Transaction ID : SA11AI.5430	
City SHELTON	State CT	Zip Code 06484	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00	
Name of Employer PELLEGRINO LAW FIRM	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 275.00		

Full Name (Last, First, Middle Initial) B. STEPHEN R BELLIS		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 121 LANE STREET		Transaction ID : SA11AI.5717	
City SHELTON	State CT	Zip Code 06484	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer PELLEGRINO LAW FIRM	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 375.00		

Full Name (Last, First, Middle Initial) C. ROBERT DAVID BEWKES		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2014	
Mailing Address 1 WHEAT LANE		Transaction ID : SA11AI.5810	
City DARIEN	State CT	Zip Code 06820	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer KELLY ASSOCIATES	Occupation REAL ESTATE		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	675.00
TOTAL This Period (last page this line number only).....	675.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
GERALD BISBEE, JR.

Mailing Address 377 MAIN STREET, UNIT 1

City State Zip Code
NEW CANAAN CT 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE HEALTH MANAGEMENT ACADEMY CHAIRMAN AND CEO

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 23 / 2014

Transaction ID : SA11AI.5674

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
SHERWOOD B BLISS

Mailing Address 25 GRAYS FARM RD

City State Zip Code
WESTON CT 06883

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5696

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
NICHOLAS BOHNSACK

Mailing Address 19 TOMAC AVE

City State Zip Code
OLD GREENWICH CT 06870

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STRATEGAS SECURITIES, LLC BROKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5939

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
DOUGLAS W. BRANDRUP

Mailing Address 52 LAUREL LEDGE CT.

City State Zip Code
STAMFORD CT 06903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF ATTORNEY / INVESTOR

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 30 / 2014

Transaction ID : SA11AI.5873

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
KIM BRASSER

Mailing Address 97 OLD STAGECOACH ROAD

City State Zip Code
REDDING CT 06896

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11AI.5553

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
ADAM BREINER

Mailing Address 93 STONELEIGH RD

City State Zip Code
FAIRFIELD CT 06825

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : SA11AI.5655

Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Mr. MARK BREINER

Mailing Address **85 MEADOWCREST DRIVE**

City **FAIRFIELD** State **CT** Zip Code **06825**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **DOCTOR**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11AI.5550

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ROSEANNE BRENNAN

Mailing Address **60 SCONSET DRIVE**

City **FAIRFIELD** State **CT** Zip Code **06824**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WOLLMAN GERHKE & SOLOMON** Occupation **OFFICE MANAGE**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5896

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
RENFREW M BRIGHTON

Mailing Address **161 LONG NECK POINT RD**

City **DARIEN** State **CT** Zip Code **06820**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BUSINESS JOURNALS INC** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 30 / 2014

Transaction ID : SA11AI.5876

Amount of Each Receipt this Period
1700.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2450.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
FRED BROOKS SR.

Mailing Address **6 JOFRAN LANE**

City **GREENWICH** State **CT** Zip Code **06830**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 19 / 2014

Transaction ID : SA11AI.5646

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
BRIAN D BRUMIT

Mailing Address **19 CHURCH STREET SOUTH**

City **WESTPORT** State **CT** Zip Code **06880**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HEALTHCARE SUBROGATION GROUP** Occupation **INSURANCE SERVICES**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11AI.5854

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
EILEEN S BUCKLEY

Mailing Address **248 LYONS PLAIN RD**

City **WESTON** State **CT** Zip Code **06883**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.5617

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Mr. ROBERT P BURKE

Mailing Address 625 RIDGEBURY RD

City State Zip Code
RIDGEFIELD CT 06877

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 31 2014

Transaction ID : SA11AI.5727

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
DAVID DENNIS BURROWS

Mailing Address 239 HILLSIDE DR

City State Zip Code
GREENWICH CT 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HUDSON ADVISOR SERVICES INC INVESTMENT MANAGEMENT

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 24 2014

Transaction ID : SA11AI.5775

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
THOMAS C BUTTERWORTH

Mailing Address 453 CARTER STREET

City State Zip Code
NEW CANAAN CT 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 30 2014

Transaction ID : SA11AI.5881

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Mr. GEORGE M CAIN

Mailing Address **PO BOX 369**

City **RIVERSIDE** State **CT** Zip Code **06878**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 11 / 2014

Transaction ID : SA11A1.5435

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
DAVID CAMPBELL

Mailing Address **27 SHIPWAY RD**

City **DARIEN** State **CT** Zip Code **06820**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RINGS END** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 30 / 2014

Transaction ID : SA11A1.5878

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
DAVID B CHARNIN

Mailing Address **11 EDGERTON CT**

City **DARIEN** State **CT** Zip Code **06820**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STRATEGIC VALUE PARTNERS LLC** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 07 / 2014

Transaction ID : SA11A1.5269

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
CHARLES CHIUSANO

Mailing Address 495 JOAN DRIVE

City State Zip Code
FAIRFIELD CT 06824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5945

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Mr. ALLEN S. CHURCH

Mailing Address 140 PROPRIETOR'S CROSSING

City State Zip Code
NEW CANAAN CT 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5961

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
LYN G COOK

Mailing Address 195 W. OLD MILL ROAD

City State Zip Code
GREENWICH CT 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11AI.5517

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3850.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
PETER ROBERT COSTA

Mailing Address 145 EAST 16TH STREET
APT 14B

City NEW YORK State NY Zip Code 10003

FEC ID number of contributing federal political committee. **C**

Name of Employer HONEYWELL Occupation MANAGEMENT

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 09 / 2014

Transaction ID : SA11AI.5300

Amount of Each Receipt this Period
 400.00

B. Full Name (Last, First, Middle Initial)
ERNEST ROBERT COTTER

Mailing Address 117 CLEARVIEW LAKE

City NEW CANAAN State CT Zip Code 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer MERRITT CAPITAL Occupation INVESTMENT ADVISOR

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 21 / 2014

Transaction ID : SA11AI.5400

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
RONALD COWEN

Mailing Address 61 SEAVIEW AVE #4

City STAMFORD State CT Zip Code 06902

FEC ID number of contributing federal political committee. **C**

Name of Employer FANNING ENTERPRISES INC Occupation MANAGEMENT

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5919

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1650.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. SUSAN COYLE		Date of Receipt M M / D D / Y Y Y Y 02 / 07 / 2014	
Mailing Address 100 HUNTINGTON STREET		Transaction ID : SA11AI.5343	
City HUNTINGTON	State CT	Zip Code 06484	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 125.00	
Name of Employer SELF-EMPLOYED		Occupation REAL ESTATE SALES	
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date 225.00	

Full Name (Last, First, Middle Initial) B. PETER CRUMBINE		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014	
Mailing Address 3 COPPER BEECH RD		Transaction ID : SA11AI.5565	
City GREENWICH	State CT	Zip Code 06830	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 200.00	
Name of Employer RETIRED		Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date 275.00	

Full Name (Last, First, Middle Initial) C. DAVID CRYSTAL II		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2014	
Mailing Address 104 RITCH AVENUE W UNIT 7		Transaction ID : SA11AI.5315	
City GREENWICH	State CT	Zip Code 06830	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00	
Name of Employer CRYSTAL & DONAHUE		Occupation ATTORNEY	
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	825.00
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
EDWARD DADAKIS

Mailing Address 81 MALLARD DRIVE

City GREENWICH State CT Zip Code 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer AON Occupation BROKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11AI.5640

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
PETER DAPUZZO

Mailing Address 18 PILOT ROCK LANE

City RIVERSIDE State CT Zip Code 06878

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5771

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
PETER DAPUZZO

Mailing Address 18 PILOT ROCK LANE

City RIVERSIDE State CT Zip Code 06878

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.5799

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

450.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) PETER DAPUZZO		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 18 PILOT ROCK LANE		Transaction ID : SA11AI.5911	
City RIVERSIDE	State CT	Zip Code 06878	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00		

Full Name (Last, First, Middle Initial) FREDERICK C DARLING		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2014	
Mailing Address 161 CLAPBOARD RIDGE ROAD		Transaction ID : SA11AI.5520	
City GREENWICH	State CT	Zip Code 06831	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer GOLDMAN SACHS	Occupation MANAGING DIRECTOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) ALVARO DA SILVA		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014	
Mailing Address 1BRAE LOCH WAY		Transaction ID : SA11AI.5672	
City SHELTON	State CT	Zip Code 06484	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer DSA COMPANIES	Occupation REAL ESTATE DEVELOPMENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Mr. NATHANIEL B DAY

Mailing Address **1 HILLSIDE DRIVE**

City **GREENWICH** State **CT** Zip Code **06830**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.5589

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. RAYMOND DEBBANE

Mailing Address **10 QUAIL RD**

City **GREENWICH** State **CT** Zip Code **06831-3369**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INNUS** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5716

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. RONALD M DEFEO

Mailing Address **45 BEACHSIDE AVE**

City **WESTPORT** State **CT** Zip Code **06880**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TEREX CORPORATION** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5679

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
LYMAN DELANO

Mailing Address 143 OLD CHURCH ROAD

City GREENWICH State CT Zip Code 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer BECK MACK & OLIVER LLC Occupation MONEY MANAGER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5777

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
RALPH L DEPANFILIS

Mailing Address 2 FRENCH FARM RD

City NORWALK State CT Zip Code 06850

FEC ID number of contributing federal political committee. **C**

Name of Employer R.L.DEPANFILIS&CO.,LLC Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.5827

Amount of Each Receipt this Period
 350.00

C. Full Name (Last, First, Middle Initial)
JOHN NORMAN DESROSIER

Mailing Address 8 WOODSIDE RD

City GREENWICH State CT Zip Code 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer DESROSIER & CO. Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5781

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
MARY JO DUNNE

Mailing Address 90 BUTTERNUT LANE

City SOUTHPORT State CT Zip Code 06890

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 13 / 2014

Transaction ID : SA11AI.5354

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
JERRY L EFFREN

Mailing Address 1857 NEWFIELD AVE

City STAMFORD State CT Zip Code 06903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 GREY ROCK COMPANIES BUILDER/DEVELOPER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11AI.5540

Amount of Each Receipt this Period
 350.00

C. Full Name (Last, First, Middle Initial)
CAROL A FEDELE

Mailing Address 64 HUCKLEBERRY HOLLOW SUITE 18

City STAMFORD State CT Zip Code 06903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.5848

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1850.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
MICHAEL FEDELE

Mailing Address **64 HUCKLEBERRY HOLLOW
SUITE 18**

City **STAMFORD** State **CT** Zip Code **06903**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE PINNACLE GROUP** Occupation **PRESIDENT/CEO**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11AI.5846

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
GREGORY FELL

Mailing Address **60 HOLLY DALE ROAD**

City **FAIRFIELD** State **CT** Zip Code **06824**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CRISPLY** Occupation **CSO**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
03 / 17 / 2014

Transaction ID : SA11AI.5563

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Mr. EZRA SAMUEL FIELD

Mailing Address **200 RIVERSIDE BLVD, #45B**

City **NEW YORK** State **NY** Zip Code **10069**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ROARK CAPITAL GROUP** Occupation **MANAGING DIRECTOR**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
03 / 17 / 2014

Transaction ID : SA11AI.5634

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
DOUGLAS P FIELDS

Mailing Address 100 MIDWOOD RD

City GREENWICH State CT Zip Code 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014

Transaction ID : SA11AI.5392

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
DESMOND FITZGERALD

Mailing Address 25 CARRINGTON AVE

City GREENWICH State CT Zip Code 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2014

Transaction ID : SA11AI.5650

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Mr. ALBERT J FITZGIBBONS

Mailing Address 234 TACONIC RD

City GREENWICH State CT Zip Code 06831-3141

FEC ID number of contributing federal political committee. **C**

Name of Employer STONINGTON PARTNERS Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5751

Amount of Each Receipt this Period
 2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
MICHAEL P FLEISCHER

Mailing Address 125 FROGTOWN ROAD

City State Zip Code
NEW CANAAN CT 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BOGEN CORPORATION BUSINESS

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : SA11AI.5861

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
MEADE Y FOGEL

Mailing Address 470 MINE HILL RD

City State Zip Code
FAIRFIELD CT 06824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 07 / 2014

Transaction ID : SA11AI.5301

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
RICHARD G FRIEDMAN

Mailing Address 738 FLINTLOCK RD

City State Zip Code
SOUTHPORT CT 06890

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MOAB OIL INC BROKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : SA11AI.5406

Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

950.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. CLARKE BRANNEN FUTCH		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014	
Mailing Address 9 TINKER LANE		Transaction ID : SA11AI.5668	
City GREENWICH	State CT	Zip Code 06830	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2600.00	
Name of Employer HEALTHCARE ROYALTY MANAGEMENT, LLC		Occupation INVESTMENTS	
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) B. JULIE WEIL FUTCH		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014	
Mailing Address 9 TINKER LANE		Transaction ID : SA11AI.5670	
City GREENWICH	State CT	Zip Code 06830	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2600.00	
Name of Employer RETIRED		Occupation VOLUNTEER/RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) C. LUKE GARDNER		Date of Receipt M M / D D / Y Y Y Y 03 / 19 / 2014	
Mailing Address 177 OLD MILL LANE		Transaction ID : SA11AI.5644	
City STAMORD	State CT	Zip Code 06902	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer SELF-EMPLOYED		Occupation ATTORNEY	
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	5450.00
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
JAMES P GAVIN

Mailing Address 105 SHERWOOD FARM ROAD

City FARIFIELD State CT Zip Code 06824

FEC ID number of contributing federal political committee. **C**

Name of Employer NEPHROLOGY ASSOCIATES Occupation DOCTOR

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11AI.5498

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
DAVID GIDWANI

Mailing Address 144 OXFORD RD

City OXFORD State CT Zip Code 06478

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11AI.5804

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
PETER K GOGOLAK

Mailing Address P.O. BOX 1166

City DARIEN State CT Zip Code 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer RR DONNELLEY Occupation PRINTING SALES

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 01 / 2014

Transaction ID : SA11AI.5286

Amount of Each Receipt this Period
 350.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Mr. SIDNEY GOODFRIEND

Mailing Address 115 ZACCHEUS MEAD LANE

City GREENWICH State CT Zip Code 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN CORPORATE PARTNERS Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 11 / 2014

Transaction ID : SA11AI.5411

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Mr. EDWARD B GOODNOW

Mailing Address 9 OLD KINGS HIGHWAY

City DARIEN State CT Zip Code 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5741

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
BENJAMIN H GORDON

Mailing Address 260 DUNBAR ROAD

City PALM BEACH State FL Zip Code 33480

FEC ID number of contributing federal political committee. **C**

Name of Employer BG STRATEGI ADVISORS Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11AI.5496

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
RUSSELL J GREENBERG

Mailing Address 15 MICHAELS WAY

City WESTON State CT Zip Code 06883

FEC ID number of contributing federal political committee. **C**

Name of Employer ALTUS CAPITAL PARTNERS Occupation INVESTMENT MANAGER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.5758

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
PETER BLAKEWELL GRIFFIN

Mailing Address 315 MILBANK AVE

City GREENWICH State CT Zip Code 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer LEXUS OF GREENWICH Occupation VP

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2014

Transaction ID : SA11AI.5524

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
PETER BLAKEWELL GRIFFIN

Mailing Address 315 MILBANK AVE

City GREENWICH State CT Zip Code 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer LEXUS OF GREENWICH Occupation VP

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.5768

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
ANTHONY GUZZI

Mailing Address 85 QUARTER HORSE LANE

City State Zip Code
FAIRFIELD CT 06824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EMCOR GROUP CEO

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 28 / 2014

Transaction ID : SA11AI.5473

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
ROBERT D HARRINGTON

Mailing Address 18 BURYING HILL RD

City State Zip Code
GREENWICH CT 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 15 / 2014

Transaction ID : SA11AI.5313

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
GEORGE HAWES

Mailing Address 6 RICHMOND ROAD

City State Zip Code
ROWAYTON CT 06853

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 11 / 2014

Transaction ID : SA11AI.5466

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
DOUG HAYNES

Mailing Address 114 MAIN STREET

City Ridgefield State CT Zip Code 06877

FEC ID number of contributing federal political committee. **C**

Name of Employer MCKINSEY AND COMPANY Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 03 / 2014

Transaction ID : SA11AI.5246

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
RANDALL MATTHEW HECK

Mailing Address 57 GREENLEAF AVENUE

City Darien State CT Zip Code 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer GOODNOW INVESTMENT GROUP Occupation INVESTMENT MANAGER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5838

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
CAROLYN HELDERMAN

Mailing Address 7 SNOWBERRY LANE

City Shelton State CT Zip Code 06484

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 07 / 2014

Transaction ID : SA11AI.5294

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
JOANNE K HENNESSY

Mailing Address 72 HOLLY LANE

City DARIEN State CT Zip Code 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5610

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
CARL ROBER HENRIKSON

Mailing Address 153 SUNSET HILL ROAD

City NEW CANAAN State CT Zip Code 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5745

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
JOHN B HESS

Mailing Address 86 RAYMOND STREET

City DARIEN State CT Zip Code 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer: NORTH STAR WEALTH INV. Occupation: FINANCIAL ADVISOR

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11AI.5539

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
KAREN HESS

Mailing Address 11 CHARCOAL HILL RD

City WESTPORT State CT Zip Code 06880

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.5614

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
WILLIAM HOLLIS Jr.

Mailing Address 121 QUARTER HORSE LANE

City FAIRFIELD State CT Zip Code 06824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 18 / 2014

Transaction ID : SA11AI.5503

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JOHN C HOWE

Mailing Address 4 WINDING LANE

City WESTPORT State CT Zip Code 06880

FEC ID number of contributing federal political committee. **C**

Name of Employer **PATRIOT GROUP** Occupation **FOUNDER**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.5608

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PAUL HUFFARD		Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2014	
Mailing Address 20 JUNIPER ROAD		Transaction ID : SA11AI.5797	
City DARIEN	State CT	Zip Code 06820	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer THE BLACKSTONE GROUP	Occupation BANKING		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) B. MARINA JACOBSON		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014	
Mailing Address PO BOX 7759		Transaction ID : SA11AI.5785	
City GREENWICH	State CT	Zip Code 06836	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) C. MARINA JACOBSON		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014	
Mailing Address PO BOX 7759		Transaction ID : SA11AI.5786	
City GREENWICH	State CT	Zip Code 06836	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

SUBTOTAL of Receipts This Page (optional).....	5300.00
TOTAL This Period (last page this line number only).....	5300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
JEFFREY R JAY MD

Mailing Address 50 FOX RUN LANE

City GREENWICH State CT Zip Code 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer GREAT POINT PARTNERS Occupation VENTURE CAPITALIST

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 15 / 2014

Transaction ID : SA11AI.5331

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
KURT JETTA

Mailing Address 28 WHIPPORWILL DRIVE

City SHELTON State CT Zip Code 06484

FEC ID number of contributing federal political committee. **C**

Name of Employer TABS GROUP, INC. Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2014

Transaction ID : SA11AI.5252

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
KURT JETTA

Mailing Address 28 WHIPPORWILL DRIVE

City SHELTON State CT Zip Code 06484

FEC ID number of contributing federal political committee. **C**

Name of Employer TABS GROUP, INC. Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11AI.5662

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3350.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Mr. C LINCOLN JEWETT

Mailing Address 537 MIDDLESEX AVE

City State Zip Code
JEWETT CT 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5710

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. BRODIE JOHNSON

Mailing Address 18 SAWMILL LANE

City State Zip Code
GREENWICH CT 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BANK OF AMERICA BANKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.5630

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
NANCY L JOHNSON

Mailing Address 310 SEABURY DR

City State Zip Code
BLOOMFIELD CT 06002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BAKER DONELSON POLICY ADVISOR

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 28 / 2014

Transaction ID : SA11AI.5369

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1050.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
TERRY H JONES

Mailing Address 606 WALNUT TREE HILL RD

City State Zip Code
SHELTON CT 06484

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED FARMER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 07 / 2014

Transaction ID : SA11AI.5273

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
KEVIN C KELLY

Mailing Address 240 YORK STREET

City State Zip Code
STRATFORD CT 06615

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KEVIN KELLY & ASSOCIATES ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5688

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
DONALD M KENDALL

Mailing Address 8 SOUND SHORE DRIVE
SUITE 210

City State Zip Code
GREENWICH CT 06830-7242

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5733

Amount of Each Receipt this Period
2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2950.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
DONALD M KENDALL

Mailing Address **8 SOUND SHORE DRIVE**
SUITE 210

City **GREENWICH** State **CT** Zip Code **06830-7242**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
03 / 31 / 2014

Transaction ID : SA11AI.5734

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
DONALD M KENDALL

Mailing Address **8 SOUND SHORE DRIVE**
SUITE 210

City **GREENWICH** State **CT** Zip Code **06830-7242**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7800.00

Date of Receipt
03 / 31 / 2014

Transaction ID : SA11AI.5735

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Mr. GILBERT S. KERNAN

Mailing Address **74 ROWAYTON**

City **NORWALK** State **CT** Zip Code **06853**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CLEANTECH PMG LLC** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
300.00

Date of Receipt
03 / 31 / 2014

Transaction ID : SA11AI.5966

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
DALLAS KERSEY

Mailing Address 154 STEEP HILL ROAD

City WESTON State CT Zip Code 06883

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5936

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
BARBARA ANNE KING

Mailing Address 14 ECHO HILL ROAD

City WESTON State CT Zip Code 06883

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5616

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. JOHN KOREN

Mailing Address 968 HARBOR ROAD

City SOUTHPORT State CT Zip Code 06490

FEC ID number of contributing federal political committee. **C**

Name of Employer BEAR STEARNS & CO. Occupation SENIOR MANAGER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5606

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
JOHN ALLEN KOSOWSKY

Mailing Address 85 WILLOUGHBY ROAD

City State Zip Code
SHELTON CT 06484

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
J ALLEN KOSOWSKY,CPA,PC CPA BOARD DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
1300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 11 / 2014

Transaction ID : SA11AI.5422

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
JOHN ALLEN KOSOWSKY

Mailing Address 85 WILLOUGHBY ROAD

City State Zip Code
SHELTON CT 06484

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
J ALLEN KOSOWSKY,CPA,PC CPA BOARD DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
1400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.5774

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
PAUL LANGE

Mailing Address 11 WYNGATE ROAD

City State Zip Code
GREENWICH CT 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BNP PARIBAS SECURITIES CORP. BANKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2014

Transaction ID : SA11AI.5867

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
JAMES A LASH

Mailing Address 4 SOUND SHORE DR

City GREENWICH State CT Zip Code 06830

FEC ID number of contributing federal political committee.

Name of Employer MANCHESTER PRINCIPAL Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5798

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
SCOTT J LASHELLE

Mailing Address 429 SILVERMINE RD

City NEW CANAAN State CT Zip Code 06840

FEC ID number of contributing federal political committee.

Name of Employer GREAT EASTERN ENERGY Occupation TRADING

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5856

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
BRITTA A LERNER

Mailing Address 15 BRICK HILL RD

City WESTON State CT Zip Code 06883

FEC ID number of contributing federal political committee.

Name of Employer SELF-EMPLOYED Occupation MEDICAL PUBLISHING CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5765

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
STEVEN M. LEVY

Mailing Address 59 PECKSLAND ROAD

City GREENWICH State CT Zip Code 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation REAL ESTATE BROKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11AI.5795

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Mr. KEN LONDONER

Mailing Address 10 RED COAT ROAD

City WESTPORT State CT Zip Code 06880

FEC ID number of contributing federal political committee. **C**

Name of Employer BIO GIG INDUSTRIES Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5573

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
PATRICIA LOVEJOY

Mailing Address 48 BURYINGHILL ROAD

City GREENWICH State CT Zip Code 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : SA11AI.5408

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. MORTON LOWENTHAL		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 72 WINDWARD LANE		Transaction ID : SA11AI.5962	
City STAMFORD	State CT	Zip Code 06903	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. TOM LUDDY		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2014	
Mailing Address 64 HEATHER DRIVE		Transaction ID : SA11AI.5813	
City NEW CANAAN	State CT	Zip Code 06840	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer JPMORGAN	Occupation ASSET MANAGEMENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) C. PATRICIA LUNKA		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014	
Mailing Address PO BOX 2068		Transaction ID : SA11AI.5666	
City DARIEN	State CT	Zip Code 06820	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer JP MORGAN	Occupation BANKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	3600.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
JI-MEI MA

Mailing Address 69 LONDONDERRY DRIVE

City State Zip Code
GREENWICH CT 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NEBULA CAPITAL INVESTOR

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.5826

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
RICHARD MACKOOL

Mailing Address 21 CORRIGAN LANE

City State Zip Code
GREENWICH CT 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.5841

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
DENNIS MAHONEY

Mailing Address 73 WYNNEWOOD LANE

City State Zip Code
STAMFORD CT 06903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TISHMAN REALTY CORPORATION REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.5808

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 122
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
DIANE D MALONE

Mailing Address 80 WINTON ROAD

City State Zip Code
FAIRFIELD CT 06824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11AI.5494

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
JASON MANDEL

Mailing Address 28 DARBROOK ROAD

City State Zip Code
WESTPORT CT 06614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SOUNDVIEW FUND MANAGEMENT, LLC INVESTMENT ADVISOR

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 05 / 2014

Transaction ID : SA11AI.5477

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
SERGIO G MANIMBO

Mailing Address 719 PONUS RIDGE

City State Zip Code
NEW CANAAN CT 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5913

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
SUSAN LEN MARK

Mailing Address 55 TOILSOME BROOK ROAD

City State Zip Code
STAMFORD CT 06905

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SHORELINE MANAGEMENT COMPANY PROPERTY MANAGER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2014

Transaction ID : SA11AI.5289

Amount of Each Receipt this Period
 _____ 500.00

B. Full Name (Last, First, Middle Initial)
LEE W MATHER JR

Mailing Address 6 FRANCINE DR

City State Zip Code
GREENWICH CT 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5590

Amount of Each Receipt this Period
 _____ 1000.00

C. Full Name (Last, First, Middle Initial)
DAVID MCCARTHY

Mailing Address 38 NEARWATER RD

City State Zip Code
NORWALK CT 06853

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IBM SALES

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11AI.5490

Amount of Each Receipt this Period
 _____ 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ 2000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
JOSEPH T MCCARTIN

Mailing Address **597 WESTPORT AVE
UNIT B332**

City **NORWALK** State **CT** Zip Code **06851**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BRIDGEWATER ASSOCIATES** Occupation **TECHONOLOGY EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
1500.00

Date of Receipt
03 / 30 / 2014

Transaction ID : SA11AI.5877

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
J. ANDREW MCENTIRE

Mailing Address **225 MARVIN RIDGE ROAD**

City **NEW CANAAN** State **CT** Zip Code **06840**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SAC CAPITAL ADVISORS** Occupation **PORFOLIO MANAGER**

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
1000.00

Date of Receipt
03 / 29 / 2014

Transaction ID : SA11AI.5859

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
BERNARD H MCGORTY

Mailing Address **30 WIGWAM DR**

City **SHELTON** State **CT** Zip Code **06484**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WILLIAM RAVEIS** Occupation **REALTOR**

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
400.00

Date of Receipt
03 / 11 / 2014

Transaction ID : SA11AI.5431

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1650.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Ms. PATRICIA A MCGOVERN

Mailing Address 968 HARBOR ROAD

City SOUTHPORT State CT Zip Code 06890

FEC ID number of contributing federal political committee. **C**

Name of Employer COLDWELL Occupation REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5632

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
ANDREW MCMAHON

Mailing Address 21 TURKEY HILL CIRCLE

City WESTPORT State CT Zip Code 06880

FEC ID number of contributing federal political committee. **C**

Name of Employer AXA Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2014

Transaction ID : SA11AI.5657

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
AUDREY MCNIFF

Mailing Address 102 ZACCHEUS MEAD LANE

City GREENWICH State CT Zip Code 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5566

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. AUDREY MCNIFF		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 102 ZACCHEUS MEAD LANE		Transaction ID : SA11AI.5917	
City GREENWICH	State CT	Zip Code 06831	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 4100.00		

Full Name (Last, First, Middle Initial) B. BRYAN MEEK		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 11 CRANBURY WOODS RD		Transaction ID : SA11AI.5927	
City NORWALK	State CT	Zip Code 06851	Amount of Each Receipt this Period _____ 60.00
FEC ID number of contributing federal political committee. C			
Name of Employer ORACLE	Occupation SOFTWARE ENGR		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date _____ 260.00		

Full Name (Last, First, Middle Initial) C. Ms. KAREN K MEREDITH		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 9 HIGH ACRE RD		Transaction ID : SA11AI.5712	
City WESTON	State CT	Zip Code 06883	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date _____ 500.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1560.00
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Mr. WILLIAM F MEYERS

Mailing Address **9 STONY BROOK ROAD**

City **DARIEN** State **CT** Zip Code **06820**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.5592

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
SUSAN MICHAELSON

Mailing Address **44 MEADOWBROOK RD**

City **FAIRFIELD** State **CT** Zip Code **06824**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RESPONSE COMPANIES** Occupation **PARALEGAL**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
02 / 28 / 2014

Transaction ID : SA11AI.5375

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
BARCLAY MILLER

Mailing Address **380 DAHLIA ST**

City **DENVER** State **CO** Zip Code **80220**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5893

Amount of Each Receipt this Period

2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
BARCLAY MILLER

Mailing Address 380 DAHLIA ST

City State Zip Code
DENVER CO 80220

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5894

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
PRESCOTT MILLER

Mailing Address 1795 WEST WESLEY ROAD

City State Zip Code
ATLANTA GA 30327

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROUND HILL CAPITAL LLC ASSET MANAGER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11AI.5638

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
DOUGLAS D MILNE

Mailing Address 100 CHRISTIE HILL ROAD

City State Zip Code
DARIEN CT 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 30 / 2014

Transaction ID : SA11AI.5869

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4350.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
DOMENIC MONACO

Mailing Address 76 WESTFIELD DR

City TRUMBULL State CT Zip Code 06611

FEC ID number of contributing federal political committee. **C**

Name of Employer PREMIER GRAPHICS Occupation SALES

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 11 / 2014

Transaction ID : SA11AI.5412

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
DOMENIC MONACO

Mailing Address 76 WESTFIELD DR

City TRUMBULL State CT Zip Code 06611

FEC ID number of contributing federal political committee. **C**

Name of Employer PREMIER GRAPHICS Occupation SALES

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5693

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JOE MONACO

Mailing Address 255 QUARTER HORSE LANE

City FAIRFIELD State CT Zip Code 06824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11AI.5555

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

450.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. SUSAN M MORAN		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2014	
Mailing Address 13 GREENLEA LANE		Transaction ID : SA11AI.5508	
City WESTON	State CT	Zip Code 06883	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer DOW JONES	Occupation MARKETING		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) B. Mr. HOWARD DEWITT MORGAN		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 1 PEACH HILL		Transaction ID : SA11AI.5719	
City DARIEN	State CT	Zip Code 06820	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer CASTLE HARLAN	Occupation CO-PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) C. ROBERT E MORRIS JR		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2014	
Mailing Address 98 RIVERSIDE AVENUE		Transaction ID : SA11AI.5882	
City RIVERSIDE	State CT	Zip Code 06878	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer O'CONNOR DAVIES. LLP	Occupation CPA		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 750.00		

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	[]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
KEVIN JOHN MOYNIHAN

Mailing Address 135 OENOKE RDGE

City State Zip Code
NEW CANAAN CT 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5940

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
THOMAS M MULROY

Mailing Address 1 BROAD STREET
UNIT 31F

City State Zip Code
STAMFORD CT 06901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
T REX LLC PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11AI.5852

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
LINDA MUNGER

Mailing Address 16 KNOLLWOOD DRIVE

City State Zip Code
GREENWICH CT 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 19 / 2014

Transaction ID : SA11AI.5654

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
RICHARD L MURPHY

Mailing Address 40 W. ELM STREET - 4F

City GREENWICH State CT Zip Code 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer ALTAMAR CAPITAL Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5613

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
Mr. KENNETH F. NAPPI

Mailing Address 42 PERCH ROAD

City SHELTON State CT Zip Code 06484

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5953

Amount of Each Receipt this Period
 350.00

C. Full Name (Last, First, Middle Initial)
EDWARD NEISS

Mailing Address 200 CHARTER OAK DRIVE

City NEW CANAAN State CT Zip Code 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 15 / 2014

Transaction ID : SA11AI.5351

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
PHYLLIS NICHOLAS

Mailing Address 40 HOWARD ROAD

City GREENWICH State CT Zip Code 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
 _____ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 01 / 2014

Transaction ID : SA11AI.5285

Amount of Each Receipt this Period
 _____ 200.00

B. Full Name (Last, First, Middle Initial)
PHYLLIS NICHOLAS

Mailing Address 40 HOWARD ROAD

City GREENWICH State CT Zip Code 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
 _____ 650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2014

Transaction ID : SA11AI.5883

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
WILLIAM H NICKERSON

Mailing Address 35 QUAIL RD

City GREENWICH State CT Zip Code 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer **E.A HOFFMAN MGT INC** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
 _____ 1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5568

Amount of Each Receipt this Period
 _____ 1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ 1450.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Mr. JOHN O'MARA

Mailing Address 12 SHERWOOD FARM LANE

City GREENWICH State CT Zip Code 06831

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5571

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
Mr. STEPHEN A OBSITNIK

Mailing Address 8 IMPERIAL LANDING

City WESTPORT State CT Zip Code 06880

FEC ID number of contributing federal political committee.

Name of Employer ENTREPRENEUR Occupation ENTREPRENEUR

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5690

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JOHN HERBERT OGDEN

Mailing Address 3 JOHN ST

City GREENWICH State CT Zip Code 06831

FEC ID number of contributing federal political committee.

Name of Employer WESTFIELD CAPITAL CORP Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5916

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. RONALD ONGARO		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 87 SAWMILL LANE		Transaction ID : SA11AI.5902	
City GREENWICH	State CT	Zip Code 06830	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer MORGAN STANLEY	Occupation WEALTH MANAGEMENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. Mr. JACK C ORCHULLI		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 446 HOLLOWTREE RDIGE ROAD		Transaction ID : SA11AI.5707	
City DARIEN	State CT	Zip Code 06820	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) C. PETER BUSCH ORTHWEIN		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2014	
Mailing Address 154 GUARDS RD		Transaction ID : SA11AI.5518	
City GREENWICH	State CT	Zip Code 06831	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer THOR INDUSTRIES	Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 1500.00		

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	[]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
PETER BUSCH ORTHWEIN

Mailing Address 154 GUARDS RD

City GREENWICH State CT Zip Code 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer THOR INDUSTRIES Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5914

Amount of Each Receipt this Period
1100.00

B. Full Name (Last, First, Middle Initial)
JOSEPH A PAGLIARO JR

Mailing Address 390 RIVER RD

City SHELTON State CT Zip Code 06484

FEC ID number of contributing federal political committee. **C**

Name of Employer RIVERVIEW FUNERAL HOME Occupation FUNERAL DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
575.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 11 / 2014

Transaction ID : SA11AI.5421

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
AUGUST A PALMER III

Mailing Address 11 RED BARN RD

City OXFORD State CT Zip Code 06478

FEC ID number of contributing federal political committee. **C**

Name of Employer RICHARD DUDGEON INC Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5677

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1375.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
JANE H PAPA

Mailing Address 29 PHILIP DR

City State Zip Code
SHELTON CT 06484

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
225.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 14 / 2014

Transaction ID : SA11AI.5346

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
JOHN PUSKAR

Mailing Address 233 DERBY AVE
#609

City State Zip Code
DERBY CT 06418

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CT HOUSE OF REPRESENTATIVES PRESS

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
475.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : SA11AI.5361

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DANIEL PFOHL QUIGLEY

Mailing Address 70 MOHAWK DRIVE

City State Zip Code
WEST HARTFORD CT 06117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WATERDOG GOLF PARTNER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5898

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2375.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Mr. TOM R RAGLAND

Mailing Address 2 SPRING ST

City RIVERSIDE State CT Zip Code 06878-2131

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5749

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
ROBERT REED

Mailing Address 36 ST. NICHOLAS RD

City DARIEN State CT Zip Code 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer RMG NETWORKS Occupation MEDIA SALES

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2014

Transaction ID : SA11AI.5237

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
ROBERT REED

Mailing Address 36 ST. NICHOLAS RD

City DARIEN State CT Zip Code 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer RMG NETWORKS Occupation MEDIA SALES

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5937

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1550.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Ms. BARBARA REIBEL

Mailing Address 42 DOUBLING ROAD

City GREENWICH State CT Zip Code 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11AI.5559

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
Mr. JAMES REIBEL

Mailing Address 42 DOUBLING ROAD

City GREENWICH State CT Zip Code 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11AI.5557

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
Mrs. MARIA REICIN

Mailing Address 179 EAST LANE

City STAMFORD State CT Zip Code 06905

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5951

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
DOUGLAS M REID

Mailing Address 258 MULBERRY HILL RD

City State Zip Code
FAIRFIELD CT 06824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 11 / 2014

Transaction ID : SA11A1.5444

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
SUSAN D. REIN

Mailing Address 174 TURTLEBACK ROAD

City State Zip Code
NEW CANAAN CT 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ELM STREET BOOKS BOOKSTORE

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 30 / 2014

Transaction ID : SA11A1.5875

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
RUSSELL S REYNOLDS JR

Mailing Address 264 TACONIC RD

City State Zip Code
GREENWICH CT 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RSR PARTNERS EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
2250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 28 / 2014

Transaction ID : SA11A1.5390

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
RUSSELL S REYNOLDS JR

Mailing Address 264 TACONIC RD

City GREENWICH State CT Zip Code 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer RSR PARTNERS Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5567

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
RUSSELL S REYNOLDS III

Mailing Address 180 DOGWOOD LANE

City STAMFORD State CT Zip Code 06903

FEC ID number of contributing federal political committee. **C**

Name of Employer RSR PARTNERS Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5975

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. DAWN RIVERA

Mailing Address 35 SINGING OAKS DR

City WESTON State CT Zip Code 06883-1605

FEC ID number of contributing federal political committee. **C**

Name of Employer CITIZENS BANK Occupation BANKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5723

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Ms. KAREN ANN ROVEGNO

Mailing Address 70 AULDWOOD RD

City State Zip Code
STAMFORD CT 06902-7816

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5437

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
JOSEPH D ROXE

Mailing Address 459 MIDDLESEX RD

City State Zip Code
DARIEN CT 06820

FEC ID number of contributing federal political committee.

Name of Employer Occupation
BAY HOLDINGS LLC CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5800

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
ROBERT P RUNK

Mailing Address 33 COMMONWEALTH DRIVE

City State Zip Code
FAIRFIELD CT 06824

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.5282

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
ROGER M SACHS

Mailing Address **6 PHEASANT LANE**

City **WESTPORT** State **CT** Zip Code **06880**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.5789

Amount of Each Receipt this Period
2100.00

B. Full Name (Last, First, Middle Initial)
BRIAN L SCANLON

Mailing Address **8 WAHACKME LANE**

City **NEW CANAAN** State **CT** Zip Code **06840**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MCKINSEY** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.5773

Amount of Each Receipt this Period
1600.00

C. Full Name (Last, First, Middle Initial)
BRIAN L SCANLON

Mailing Address **8 WAHACKME LANE**

City **NEW CANAAN** State **CT** Zip Code **06840**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MCKINSEY** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.5969

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
DAVID SCHERL

Mailing Address **4 PUMP LANE**

City **RIDGEFIELD** State **CT** Zip Code **06877**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MORRISONCOHEN LLP** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 14 / 2014

Transaction ID : SA11AI.5356

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
GEORGE W SCHIELE

Mailing Address **19 HILL RD**

City **GREENWICH** State **CT** Zip Code **06830**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GW SCHIELE, INC** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5886

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ERIBERTO R SCOCIMARA

Mailing Address **16 LAUREL LANE**

City **GREENWICH** State **CT** Zip Code **06830**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ROCKWOOD HOLDINGS** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 18 / 2014

Transaction ID : SA11AI.5321

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
PETER K SELDIN

Mailing Address 1000 PONUS RIDGE

City NEW CANAAN State CT Zip Code 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : SA11AI.5863

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
DONALD J SELINGER

Mailing Address 161 LOCUST AVE

City RYE State NY Zip Code 10580

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 14 / 2014

Transaction ID : SA11AI.5311

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
BRENDAN SHANAHAN

Mailing Address 14 TWIN WALLS LANE

City WESTON State CT Zip Code 06883

FEC ID number of contributing federal political committee. **C**

Name of Employer EMBLEM HEALTH Occupation FINANCE

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 06 / 2014

Transaction ID : SA11AI.5487

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
CARY A SHAPOFF

Mailing Address 206 STONEWALL LANE

City State Zip Code
FAIRFIELD CT 06824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FAIRFIELD PERIODONTICS, LLC PERIODONTIST

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 29 / 2014

Transaction ID : SA11AI.5857

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JAY B SHEEHY

Mailing Address 190 CHAPEL STREET

City State Zip Code
STRATFORD CT 06614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KOMCO SUPPLU CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2725.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 09 / 2014

Transaction ID : SA11AI.5790

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
ROSALIND E SHENKMAN

Mailing Address 1 GASTON FARM RD

City State Zip Code
GREENWICH CT 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5755

Amount of Each Receipt this Period
2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2975.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
ROSALIND E SHENKMAN

Mailing Address 1 GASTON FARM RD

City GREENWICH State CT Zip Code 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5756

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
ROSALIND E SHENKMAN

Mailing Address 1 GASTON FARM RD

City GREENWICH State CT Zip Code 06831

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5757

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
ALAN SHURR

Mailing Address 13 CRESCENT BEECH ROAD

City ROWAYTOWN State CT Zip Code 06853

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 26 / 2014

Transaction ID : SA11AI.5811

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
JONATHAN SIMON

Mailing Address 320 OLD CHURCH ROAD

City GREENWICH State CT Zip Code 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer JP MORGAN Occupation FUND MANAGER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 18 / 2014

Transaction ID : SA11AI.5642

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
ANTHONY F SIMONETTI

Mailing Address 6 HAYFIELD DR

City SHELTON State CT Zip Code 06484

FEC ID number of contributing federal political committee. **C**

Name of Employer MARSHALL LANE MANOR Occupation ADMINISTRATOR

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5791

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
BERNARD SIPPIN

Mailing Address 23 WESTVIEW DR

City MONROE State CT Zip Code 06468

FEC ID number of contributing federal political committee. **C**

Name of Employer SIPPIN ENERGY Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 03 / 2014

Transaction ID : SA11AI.5244

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Mr. GEORGE SKAKEL

Mailing Address 81 HOLLY HILL LANE

City GREENWICH State CT Zip Code 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer EMG Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.5587

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. GEORGE SKAKEL

Mailing Address 81 HOLLY HILL LANE

City GREENWICH State CT Zip Code 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer EMG Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11AI.5839

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
WILLIAM SLOAN

Mailing Address 120 WOOD HOUSE ROAD

City FAIRFIELD State CT Zip Code 06824

FEC ID number of contributing federal political committee. **C**

Name of Employer UBS Occupation FINANCE

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11AI.5792

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
FRANCHON SMITHSON

Mailing Address 21 RED COAT ROAD

City WESTPORT State CT Zip Code 06880

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 07 / 2014

Transaction ID : SA11AI.5542

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
FRANCHON SMITHSON

Mailing Address 21 RED COAT ROAD

City WESTPORT State CT Zip Code 06880

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 07 / 2014

Transaction ID : SA11AI.5545

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
FRANCHON SMITHSON

Mailing Address 21 RED COAT ROAD

City WESTPORT State CT Zip Code 06880

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 07 / 2014

Transaction ID : SA11AI.5546

Amount of Each Receipt this Period
 2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7800.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
MICHAEL SPELLACY

Mailing Address **6 ELWIL DRIVE**

City **WESTPORT** State **CT** Zip Code **06880**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BROADHAVEN CAPITAL PARTNERS** Occupation **FINANCE**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5900

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Ms. MARY A STAPLES

Mailing Address **4 TODS DRIFT WAY**

City **OLD GREENWICH** State **CT** Zip Code **06870**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF - EMPLOYED** Occupation **DA SYSTEMS GROUP**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11AI.5583

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CRAIG R STAPLETON

Mailing Address **21 ALDEN RD**

City **GREENWICH** State **CT** Zip Code **06836**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ENTREPRENEUR** Occupation **ENTREPRENEUR**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 14 / 2014

Transaction ID : SA11AI.5348

Amount of Each Receipt this Period
2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
DEBBIE STAPLETON

Mailing Address 21 ALDEN RD

City State Zip Code
GREENWICH CT 06836

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 14 / 2014

Transaction ID : SA11AI.5350

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
WILLIAM STAPLETON

Mailing Address 15 SHERWOOD FARM RD

City State Zip Code
FAIRFIELD CT 06824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HEALTHPLANONE, LLC MANAGER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
1750.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11AI.5551

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JOHN H STARR

Mailing Address 161 SPRING HOUSE RD

City State Zip Code
FAIRFIELD CT 06824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED INVESTMENT BANKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 06 / 2014

Transaction ID : SA11AI.5303

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
PAUL A STEIN

Mailing Address 172 OENOKE LANE

City State Zip Code
NEW CANAAN CT 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5721

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
PAUL A STEIN

Mailing Address 172 OENOKE LANE

City State Zip Code
NEW CANAAN CT 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5889

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JAYME J STEVENSON

Mailing Address 65 ST. NICHOLAS RD

City State Zip Code
DARIEN CT 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TOWN OF DARIEN SELECTMAN

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5949

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) DAVIDDE E STRACKBEIN		Date of Receipt M M / D D / Y Y Y Y 02 / 24 / 2014	
Mailing Address 53 RIDGEVIEW AVE		Transaction ID : SA11AI.5325	
City GREENWICH	State CT	Zip Code 06830	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) DAVIDDE E STRACKBEIN		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2014	
Mailing Address 53 RIDGEVIEW AVE		Transaction ID : SA11AI.5515	
City GREENWICH	State CT	Zip Code 06830	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 1250.00		

Full Name (Last, First, Middle Initial) JOHN E STRIPP		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014	
Mailing Address 4 SCATACOOK TRL		Transaction ID : SA11AI.5615	
City WESTON	State CT	Zip Code 06883	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 850.00		

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
JOHN E STRIPP

Mailing Address 4 SCATACOOK TRL

City WESTON State CT Zip Code 06883

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5697

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
BRANDON W SWEITZER

Mailing Address 751 WEED STREET

City NEW CANAAN State CT Zip Code 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer ST. JOHNS UNIVERSITY Occupation UNIVERSITY ADMINISTRATOR

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.5814

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
LINDA TAVLARIOS

Mailing Address 15 WRENFIELD LANE

City DARIEN State CT Zip Code 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2014

Transaction ID : SA11AI.5648

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PETR A THORSON		Date of Receipt M M / D D / Y Y Y Y 02 / 14 / 2014	
Mailing Address 15 RIDGEBROOK RD		Transaction ID : SA11AI.5319	
City GREENWICH	State CT	Zip Code 06830	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00	
Name of Employer MERRIL LYNCH	Occupation INVESTMENTS		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 600.00		

Full Name (Last, First, Middle Initial) B. Mr. DENNIS H TRACEY		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 18 ECHO HILL RD		Transaction ID : SA11AI.5753	
City WESTON	State CT	Zip Code 06883	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer HOGAN LOVELLS	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. KATHRYN TRAYNOR		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2014	
Mailing Address 1530 CROSS HWY		Transaction ID : SA11AI.5533	
City FAIRFIELD	State CT	Zip Code 06824	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 750.00		

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	1100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
PAUL R TREGURTHA

Mailing Address **248 LONG NECK POINT**

City **DARIEN** State **CT** Zip Code **06820**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MORAN TOWING CORP** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 11 / 2014

Transaction ID : SA11AI.5463

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
SUSAN A TRISCHMAN

Mailing Address **76 STEWARD HILL CIRCLE**

City **FAIRFIELD** State **CT** Zip Code **06824**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **VOLUNTEER**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 11 / 2014

Transaction ID : SA11AI.5467

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. DANA C TROXELL JR

Mailing Address **290 LYONS PLAIN RD**

City **WESTON** State **CT** Zip Code **06883**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ANGELO GORDON AND CO.** Occupation **INVESTMENTS**

Receipt For: 2014
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.5695

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
RONALD J ULRICH

Mailing Address 329 DANS HWY

City State Zip Code
NEW CANAAN CT 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BREITHORD CAPITAL INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11AI.5317

Amount of Each Receipt this Period
 1500.00

B. Full Name (Last, First, Middle Initial)
RICHARD VOELL

Mailing Address 25 PILOT ROCK LANE

City State Zip Code
RIIVERSIDE CT 06878

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5832

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
N. R. WALKER

Mailing Address 31 MEAD ST

City State Zip Code
NEW CANAAN CT 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5948

Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
DAVID WARD

Mailing Address 426 MINE HILL RD

City State Zip Code
FAIRFIELD CT 06824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EARLY ADVANTAGE PUBLISHER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 18 / 2014

Transaction ID : SA11AI.5501

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
RICHARD WARD

Mailing Address 77 WINFIELD LANE

City State Zip Code
NEW CANAAN CT 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11AI.5842

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JAMES R WEINBERG

Mailing Address 169 MONROE TPKE

City State Zip Code
MONROE CT 06468

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SAFE HARBOR CHARTERING OWNER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 24 / 2014

Transaction ID : SA11AI.5305

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
JAMES R WEINBERG

Mailing Address 169 MONROE TPKE

City MONROE State CT Zip Code 06468

FEC ID number of contributing federal political committee. **C**

Name of Employer SAFE HARBOR CHARTERING Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5907

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
SUE ANN WEINBERG

Mailing Address 70 FIELD POINT CIRCLE

City GREENWICH State CT Zip Code 06830

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 11 / 2014

Transaction ID : SA11AI.5452

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
KENNETH WEINSTEIN

Mailing Address 5 DAIRY LANE

City EASTON State CT Zip Code 06612

FEC ID number of contributing federal political committee. **C**

Name of Employer NEWTOWN SAVINGS BANK Occupation MANAGER

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11AI.5250

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
THOMAS J WELCH

Mailing Address 47 OLD SHELTON RD

City State Zip Code
SHELTON CT 06484

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WTSB ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
575.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 11 / 2014

Transaction ID : SA11AI.5429

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
HOWE G WHELOCK JR

Mailing Address 37 HAMILTON LANE

City State Zip Code
DARIEN CT 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 11 / 2014

Transaction ID : SA11AI.5352

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
RICHARD V WIEHL

Mailing Address 204 SPRING HILL RD

City State Zip Code
TRUMBULL CT 06611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CONSUMERS PETROLEUM EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 28 / 2014

Transaction ID : SA11AI.5377

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1225.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 122
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
Mr. DAVE H WILLIAMS

Mailing Address 1330 AVENUE OF THE AMERICAS
38TH FL

City NEW YORK State NY Zip Code 10019

FEC ID number of contributing federal political committee. **C**

Name of Employer ALLIANCE CAPITAL Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5703

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
LOUIS S WOLFE

Mailing Address 890 PEQUOT AVE

City SOUTHPORT State CT Zip Code 06890

FEC ID number of contributing federal political committee. **C**

Name of Employer MERRITT CAPITAL PARTNERS Occupation FUND OF FUNDS

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 11 / 2014

Transaction ID : SA11AI.5239

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
GEORGE U WYPER

Mailing Address 65 KNOLLWOOD LANE

City DARIEN State CT Zip Code 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer ROYCE AND ASSOCIATES Occupation FINANCE

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.5708

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 87 OF 122
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. Full Name (Last, First, Middle Initial)
SANDRA ZALIK

Mailing Address 208 HOUSATONIC AVENUE

City STRATFORD State CT Zip Code 06615

FEC ID number of contributing federal political committee. **C**

Name of Employer PITNEY BOWES Occupation MANAGER, QUALITY & CONTROLS

Receipt For: 2014
 Primary General
 Other (specify) Convention

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11A1.5793

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

100.00

189810.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. 203 INK LLC			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014		
Mailing Address 13 GREENLEA LANE			Amount of Each Disbursement this Period 3722.25		
City WESTON	State CT	Zip Code 06883	Transaction ID : SB17.5106		
Purpose of Disbursement DIGITAL CONSULTING		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention				
State: District:					

Full Name (Last, First, Middle Initial) B. AMTRAK			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014		
Mailing Address 50 MASSACHUSETTS AVE			Amount of Each Disbursement this Period 21.50		
City WASHINGTON	State DC	Zip Code 20002	Transaction ID : SB17.5126		
Purpose of Disbursement TRAVEL: FOOD		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention				
State: District:					

Full Name (Last, First, Middle Initial) C. AU BON PAN			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014		
Mailing Address 19 FID KENNEDY AVE			Amount of Each Disbursement this Period 32.70		
City BOSTON	State MA	Zip Code 02210	Transaction ID : SB17.5114		
Purpose of Disbursement TRAVEL: FOOD		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	3722.25
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. CENTER SERVICES		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 8 HUNTINGTON ST		Amount of Each Disbursement this Period 263.00
City SHELTON	State CT	
Zip Code 06484	Purpose of Disbursement CLEANING SERVICES	Transaction ID : SB17.5112
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. CIRCLE DINER		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 441 POST RD		Amount of Each Disbursement this Period 30.31
City FIARFIELD	State CT	
Zip Code 06824	Purpose of Disbursement TRAVEL: FOOD	Transaction ID : SB17.5120
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. DAN DEBICELLA		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 1 LAZY BROOK RD		Amount of Each Disbursement this Period 263.00
City SHELTON	State CT	
Zip Code 06484	Purpose of Disbursement TRAVEL	Transaction ID : SB17.5109
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	263.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. DAN DEBICELLA			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014		
Mailing Address 1 LAZY BROOK RD			Amount of Each Disbursement this Period 716.21		
City SHELTON	State CT	Zip Code 06484	Transaction ID : SB17.5110		
Purpose of Disbursement TRAVEL: SEE MEMO ENTIRES		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention				
State: District:					

Full Name (Last, First, Middle Initial) B. EPAY BUSINESS SOLUTIONS INC			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014		
Mailing Address 27A MIDSTATE DRIVE SUITE 218			Amount of Each Disbursement this Period 1909.50		
City AUBURN	State MA	Zip Code 01501	Transaction ID : SB17.5220		
Purpose of Disbursement PAYROLL SERVICES/TAXES		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention				
State: District:					

Full Name (Last, First, Middle Initial) C. EPAY BUSINESS SOLUTIONS INC			Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014		
Mailing Address 27A MIDSTATE DRIVE SUITE 218			Amount of Each Disbursement this Period 35.30		
City AUBURN	State MA	Zip Code 01501	Transaction ID : SB17.5221		
Purpose of Disbursement PAYROLL SERVICES/TAXES		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	2661.01
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 122		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. EPAY BUSINESS SOLUTIONS INC		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 27A MIDSTATE DRIVE SUITE 218		Amount of Each Disbursement this Period 382.50 Transaction ID : SB17.5223
City AUBURN State MA Zip Code 01501	Purpose of Disbursement PAYROLL SERVICES/TAXES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. EPAY BUSINESS SOLUTIONS INC		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 27A MIDSTATE DRIVE SUITE 218		Amount of Each Disbursement this Period 33.90 Transaction ID : SB17.5224
City AUBURN State MA Zip Code 01501	Purpose of Disbursement PAYROLL SERVICES/TAXES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. EPAY BUSINESS SOLUTIONS INC		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 27A MIDSTATE DRIVE SUITE 218		Amount of Each Disbursement this Period 382.50 Transaction ID : SB17.5226
City AUBURN State MA Zip Code 01501	Purpose of Disbursement PAYROLL SERVICES/TAXES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	798.90
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. EPAY BUSINESS SOLUTIONS INC		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 27A MIDSTATE DRIVE SUITE 218		Amount of Each Disbursement this Period 33.90
City AUBURN State MA Zip Code 01501	Purpose of Disbursement PAYROLL SERVICES/TAXES	
Candidate Name		Transaction ID : SB17.5227
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. EPAY BUSINESS SOLUTIONS INC		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 27A MIDSTATE DRIVE SUITE 218		Amount of Each Disbursement this Period 382.50
City AUBURN State MA Zip Code 01501	Purpose of Disbursement PAYROLL SERVICES/TAXES	
Candidate Name		Transaction ID : SB17.5229
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. EPAY BUSINESS SOLUTIONS INC		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 27A MIDSTATE DRIVE SUITE 218		Amount of Each Disbursement this Period 33.90
City AUBURN State MA Zip Code 01501	Purpose of Disbursement PAYROLL SERVICES/TAXES	
Candidate Name		Transaction ID : SB17.5230
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	450.30
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. EPAY BUSINESS SOLUTIONS INC		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2014
Mailing Address 27A MIDSTATE DRIVE SUITE 218		Amount of Each Disbursement this Period 382.50 Transaction ID : SB17.5232
City AUBURN State MA Zip Code 01501	Purpose of Disbursement PAYROLL SERVICES/TAXES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. EPAY BUSINESS SOLUTIONS INC		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2014
Mailing Address 27A MIDSTATE DRIVE SUITE 218		Amount of Each Disbursement this Period 33.90 Transaction ID : SB17.5233
City AUBURN State MA Zip Code 01501	Purpose of Disbursement PAYROLL SERVICES/TAXES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. EPAY BUSINESS SOLUTIONS INC		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 27A MIDSTATE DRIVE SUITE 218		Amount of Each Disbursement this Period 382.50 Transaction ID : SB17.5235
City AUBURN State MA Zip Code 01501	Purpose of Disbursement PAYROLL SERVICES/TAXES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	798.90
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 94 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. EPAY BUSINESS SOLUTIONS INC		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 27A MIDSTATE DRIVE SUITE 218		Amount of Each Disbursement this Period 33.90
City AUBURN State MA Zip Code 01501	Purpose of Disbursement PAYROLL SERVICES/TAXES	
Candidate Name	Category/Type	Transaction ID : SB17.5236
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	State: District:	

Full Name (Last, First, Middle Initial) B. JACKSON-ALVAREZ GROUP		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 7777 LEESBURG PIKE SUITE 407N		Amount of Each Disbursement this Period 2500.00
City FALLS CHURCH State VA Zip Code 22043	Purpose of Disbursement RESEARCH CONSULTING	
Candidate Name	Category/Type	Transaction ID : SB17.5140
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	State: District:	

Full Name (Last, First, Middle Initial) C. MOCCIA EVENT		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 99 EAST AVE		Amount of Each Disbursement this Period 75.00
City NORWALK State CT Zip Code 06851	Purpose of Disbursement EVENT REGISTRATION FEE	
Candidate Name	Category/Type	Transaction ID : SB17.5134 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2533.90
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 95 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. MONROE DINER		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 568 MAIN STREET		Amount of Each Disbursement this Period 24.31
City MONROE	State CT	
Zip Code 06468	Purpose of Disbursement TRAVEL: FOOD	Transaction ID : SB17.5122
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. NATIONAL RESEARCH INC		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 146 STATE HIGHWAY 34		Amount of Each Disbursement this Period 22650.00
City HOLMDEL	State NJ	
Zip Code 07733	Purpose of Disbursement POLLING	Transaction ID : SB17.5147
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. PERFORMANCE PARKING LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 160 W 66TH STREET		Amount of Each Disbursement this Period 48.00
City NEW YORK	State NY	
Zip Code 10023	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION	Transaction ID : SB17.5128
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	22650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PHOENIX HOTEL DC			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014		
Mailing Address 520 NORTH CAPITOL ST NW			Amount of Each Disbursement this Period 286.07		
City WASHINGTON	State DC	Zip Code 20001	Transaction ID : SB17.5132 [MEMO ITEM]		
Purpose of Disbursement CANDIDATE TRAVEL: LODGING		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention				
State: District:					

Full Name (Last, First, Middle Initial) B. PIRYX, INC.			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014		
Mailing Address 144 2ND ST 1ST FLOOR			Amount of Each Disbursement this Period 63.25		
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.5150		
Purpose of Disbursement MERCHANT FEES		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention				
State: District:					

Full Name (Last, First, Middle Initial) C. PIRYX, INC.			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014		
Mailing Address 144 2ND ST 1ST FLOOR			Amount of Each Disbursement this Period 31.63		
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.5151		
Purpose of Disbursement MERCHANT FEES		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	94.88
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 431.25 Transaction ID : SB17.5152
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 2.88 Transaction ID : SB17.5153
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 17.26 Transaction ID : SB17.5154
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	451.39
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 1180.55 Transaction ID : SB17.5155
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 442.81 Transaction ID : SB17.5156
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 19.26 Transaction ID : SB17.5157
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1642.62
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 99 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 126.50 Transaction ID : SB17.5158
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 1.72 Transaction ID : SB17.5159
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 29.00 Transaction ID : SB17.5160
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	157.22
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.5161
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 30.19 Transaction ID : SB17.5162
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 9.20 Transaction ID : SB17.5163
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	53.77
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 5.75 Transaction ID : SB17.5164
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 0.58 Transaction ID : SB17.5165
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 57.50 Transaction ID : SB17.5166
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	63.83
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 122			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PIRYX, INC.			Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014		
Mailing Address 144 2ND ST 1ST FLOOR			Amount of Each Disbursement this Period 14.38		
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.5167		
Purpose of Disbursement MERCHANT FEES		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention				
State: District:					

Full Name (Last, First, Middle Initial) B. PIRYX, INC.			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014		
Mailing Address 144 2ND ST 1ST FLOOR			Amount of Each Disbursement this Period 28.76		
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.5168		
Purpose of Disbursement MERCHANT FEES		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention				
State: District:					

Full Name (Last, First, Middle Initial) C. PIRYX, INC.			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014		
Mailing Address 144 2ND ST 1ST FLOOR			Amount of Each Disbursement this Period 1.44		
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.5169		
Purpose of Disbursement MERCHANT FEES		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	44.58
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 29.00
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.5170	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 40.25
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.5171	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 1.44
City SAN FRANCISCO State CA Zip Code 94105	Transaction ID : SB17.5172	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	70.69
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 46.59
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement MERCHANT FEES	Category/Type	Transaction ID : SB17.5173
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 86.25
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement MERCHANT FEES	Category/Type	Transaction ID : SB17.5174
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 34.50
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement MERCHANT FEES	Category/Type	Transaction ID : SB17.5175
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	167.34
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 11.50 Transaction ID : SB17.5176
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 14.38 Transaction ID : SB17.5177
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 10.07 Transaction ID : SB17.5178
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	35.95
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 11.50
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	Transaction ID : SB17.5179
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	State: District:	

Full Name (Last, First, Middle Initial) B. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 235.75
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	Transaction ID : SB17.5180
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	State: District:	

Full Name (Last, First, Middle Initial) C. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 1.44
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	Transaction ID : SB17.5181
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	248.69
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 69.00 Transaction ID : SB17.5182
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 1.44 Transaction ID : SB17.5183
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 74.75 Transaction ID : SB17.5184
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	145.19
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 58.94
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Transaction ID : SB17.5185
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 21.57
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Transaction ID : SB17.5186
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 454.25
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Transaction ID : SB17.5187
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	534.76
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 370.89
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Transaction ID : SB17.5188
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 5.75
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Transaction ID : SB17.5189
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 14.38
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement MERCHANT FEES	Candidate Name	Transaction ID : SB17.5190
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	391.02
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 4,567.89 126.50
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Transaction ID : SB17.5191
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 4,567.89 158.13
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Transaction ID : SB17.5192
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. PIRYX, INC.		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 144 2ND ST 1ST FLOOR		Amount of Each Disbursement this Period 4,567.89 135.13
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Transaction ID : SB17.5193
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	419.76
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PLAZA DINER		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 737 BRIDGEPORT AVE		Amount of Each Disbursement this Period 23.67
City SHELTON	State CT	
Zip Code 06484	Purpose of Disbursement TRAVEL: FOOD	Transaction ID : SB17.5116
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. PREMIER GRAPHICS, LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 860 HONEYSPOD RD		Amount of Each Disbursement this Period 1870.97
City STRATFORD	State CT	
Zip Code 06615	Purpose of Disbursement DIRECT MAIL PRINTING	Transaction ID : SB17.5194
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. PREMIER GRAPHICS, LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 860 HONEYSPOD RD		Amount of Each Disbursement this Period 800.33
City STRATFORD	State CT	
Zip Code 06615	Purpose of Disbursement DIRECT MAIL PRINTING	Transaction ID : SB17.5195
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2671.33
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. PREMIER GRAPHICS, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 860 HONEYSPOD RD		Amount of Each Disbursement this Period 634.69
City STRATFORD	State CT Zip Code 06615	
Purpose of Disbursement DIRECT MAIL PRINTING	Category/Type	Transaction ID : SB17.5196
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. PREMIER GRAPHICS, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 860 HONEYSPOD RD		Amount of Each Disbursement this Period 3385.50
City STRATFORD	State CT Zip Code 06615	
Purpose of Disbursement DIRECT MAIL PRINTING	Category/Type	Transaction ID : SB17.5197
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. JOHN PUSKAR		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 233 DERBY AVE #609		Amount of Each Disbursement this Period 443.00
City DERBY	State CT Zip Code 06418	
Purpose of Disbursement MILEAGE	Category/Type	Transaction ID : SB17.5141
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4463.19
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. JOHN PUSKAR		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 233 DERBY AVE #609		Amount of Each Disbursement this Period 299.60 Transaction ID : SB17.5142
City DERBY State CT Zip Code 06418	Purpose of Disbursement MILEAGE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. JOHN PUSKAR		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 233 DERBY AVE #609		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.5143
City DERBY State CT Zip Code 06418	Purpose of Disbursement MILEAGE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. JOHN PUSKAR		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 233 DERBY AVE #609		Amount of Each Disbursement this Period 15000.00 Transaction ID : SB17.5218
City DERBY State CT Zip Code 06418	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	15549.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. JOHN PUSKAR		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 233 DERBY AVE #609		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.5222
City DERBY State CT Zip Code 06418	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. JOHN PUSKAR		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 233 DERBY AVE #609		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.5225
City DERBY State CT Zip Code 06418	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. JOHN PUSKAR		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 233 DERBY AVE #609		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.5228
City DERBY State CT Zip Code 06418	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. JOHN PUSKAR			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014		
Mailing Address 233 DERBY AVE #609			Amount of Each Disbursement this Period 1556.34		
City DERBY	State CT	Zip Code 06418	Transaction ID : SB17.5144		
Purpose of Disbursement MILEAGE		Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention				
State: District:					

Full Name (Last, First, Middle Initial) B. JOHN PUSKAR			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2014		
Mailing Address 233 DERBY AVE #609			Amount of Each Disbursement this Period 5000.00		
City DERBY	State CT	Zip Code 06418	Transaction ID : SB17.5231		
Purpose of Disbursement PAYROLL		Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention				
State: District:					

Full Name (Last, First, Middle Initial) C. JOHN PUSKAR			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014		
Mailing Address 233 DERBY AVE #609			Amount of Each Disbursement this Period 792.00		
City DERBY	State CT	Zip Code 06418	Transaction ID : SB17.5145		
Purpose of Disbursement MILEAGE		Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	7348.34
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. JOHN PUSKAR		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 233 DERBY AVE #609		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.5234
City DERBY State CT Zip Code 06418	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. RED CURVE SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 138 CONANT STREET 1ST FLOOR		Amount of Each Disbursement this Period 3017.36 Transaction ID : SB17.5198
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. RED CURVE SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 138 CONANT STREET 1ST FLOOR		Amount of Each Disbursement this Period 2423.35 Transaction ID : SB17.5199
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10440.71
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. RED CURVE SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 138 CONANT STREET 1ST FLOOR		Amount of Each Disbursement this Period 2400.00 Transaction ID : SB17.5200
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) B. RED CURVE SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 138 CONANT STREET 1ST FLOOR		Amount of Each Disbursement this Period 2411.80 Transaction ID : SB17.5201
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. SAFE HARBOUR HOUSE, LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address 169 MONROE TURNPIKE		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.5205
City MONROE State CT Zip Code 06468	Purpose of Disbursement RENT & UTILITIES	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5311.80
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. SAFE HARBOUR HOUSE, LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 169 MONROE TURNPIKE		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.5206
City MONROE	State CT	
Zip Code 06468	Purpose of Disbursement RENT & UTILITIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Convention		

Full Name (Last, First, Middle Initial) B. SAFE HARBOUR HOUSE, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 169 MONROE TURNPIKE		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.5207
City MONROE	State CT	
Zip Code 06468	Purpose of Disbursement RENT & UTILITIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Convention		

Full Name (Last, First, Middle Initial) C. SHERWOOD DINER		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 901 POST ROAD E		Amount of Each Disbursement this Period 20.45 Transaction ID : SB17.5118 [MEMO ITEM]
City WESTPORT	State CT	
Zip Code 06880	Purpose of Disbursement TRAVEL: FOOD	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Convention		

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. STARBUCKS		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 2401 UTAH AVE S		Amount of Each Disbursement this Period 12.20
City SEATTLE	State WA Zip Code 98134	
Purpose of Disbursement TRAVEL: FOOD	Category/Type	Transaction ID : SB17.5124
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. THE COUNTRY CLUB OF DARIEN		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 300 MANSFIELD AVE		Amount of Each Disbursement this Period 1491.14
City DARIEN	State CT Zip Code 06820	
Purpose of Disbursement FACILITY RENTAL/CATERING SERVICES	Category/Type	Transaction ID : SB17.5211
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

Full Name (Last, First, Middle Initial) C. THE LUCROR GROUP, LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 14 HAVERHILL PL		Amount of Each Disbursement this Period 2683.87
City TRUMBULL	State CT Zip Code 06611	
Purpose of Disbursement STRATEGY CONSULTING	Category/Type	Transaction ID : SB17.5212
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4175.01
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 122			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. TUSK PRODUCTIONS LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 38 LAKEWOOD DR		Amount of Each Disbursement this Period 10463.79
City DENVILLE State NJ Zip Code 07834	Purpose of Disbursement FUNDRAISING CONSULTING	
Candidate Name		Transaction ID : SB17.5213
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. TUSK PRODUCTIONS LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 38 LAKEWOOD DR		Amount of Each Disbursement this Period 5252.02
City DENVILLE State NJ Zip Code 07834	Purpose of Disbursement FUNDRAISING CONSULTING	
Candidate Name		Transaction ID : SB17.5214
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. TUSK PRODUCTIONS LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 38 LAKEWOOD DR		Amount of Each Disbursement this Period 6581.47
City DENVILLE State NJ Zip Code 07834	Purpose of Disbursement FUNDRAISING CONSULTING	
Candidate Name		Transaction ID : SB17.5215
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	22297.28
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 121 OF 122	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

A. VERBATIM SERVICES

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 794

City WEST CALDWELL State NJ Zip Code 07007

Purpose of Disbursement DIRECT MAIL PRINTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) Convention

State: District:

Date of Disbursement: 03 / 18 / 2014

Amount of Each Disbursement this Period: 3108.35

Transaction ID : SB17.5216

Category/Type

B. YELLOW CAB CO

Full Name (Last, First, Middle Initial)
Mailing Address 1636 BLADENSBURG RD NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) Convention

State: District:

Date of Disbursement: 03 / 03 / 2014

Amount of Each Disbursement this Period: 13.00

Transaction ID : SB17.5130

[MEMO ITEM]

Category/Type

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 3108.35

TOTAL This Period (last page this line number only)..... 129765.53

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 122 OF 122	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEBICELLA FOR CONGRESS 2014

Full Name (Last, First, Middle Initial) A. CONNECTICUT REPUBLICAN SCC		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 31 PRATT STREET 4TH FLOOR		Amount of Each Disbursement this Period 500.00
City HARTFORD State CT Zip Code 06103	Purpose of Disbursement PARTY CONTRIBUTION	
Candidate Name		Transaction ID : SB21.5967
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Convention	
State: _____ District: _____	Category/Type	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City _____ State _____ Zip Code _____	Purpose of Disbursement	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____	Category/Type	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City _____ State _____ Zip Code _____	Purpose of Disbursement	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	500.00